

ISSUE SLIP STAPLE AREA (for additional cross references)

10/02

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	12-19/50
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

71435 5/9/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	1	1	9/30/03
2	2	2	9/30/03
3	3	3	9/30/03
4	4	4	9/30/03
5	5	5	9/30/03
6	6	6	9/30/03
7	7	7	9/30/03
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49	49	49	9/30/03
50	50	50	9/30/03

Claim	Final	Original	Date
51	51	51	9/30/03
52	52	52	9/30/03
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100	100	100	9/30/03

Claim	Final	Original	Date
101	101	101	9/30/03
102	102	102	9/30/03
103	103	103	9/30/03
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148	148	148	9/30/03
149	149	149	9/30/03
150	150	150	9/30/03

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)